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#### FORM D

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

OMB APPROVAL

OMB Number:

3235-0076 May 31,2005

FINANCIAL

Expires: M. Estimated average burden

hours per responses ...... 16.00

	NOTICE OF SALE OF SECURITIES		SEC U	SE ONLY
<del> </del>	PURSUANT TO REGULATION D,		Prefix	Serial
	SECTION 4(6), AND/OR	RECEIVED	A.	
UNIF	ORM LIMITED OFFERING EXEMPTO	V Column	DATE DATE	RECEIVED
	M	AR 0 5 2003		
Name of Offering ( check if this is an amendment a Lukadoo, LLC		A 155 KM	37	
Filing Under (Check box(es) that apply):   Rule 50 Type of Filing:   New Filing   Amendment	4	J. DEOE 3		
	A. BASIC IDENTIFICATION DATA			<b>                                    </b>
1. Enter the information requested about the issuer				03016266
Name of Issuer ( check if this is an amendment and Lukadoo, LLC	d name has changed, and indicate change)			•
Address of Executive Officers 1436 Calle de Jonela, Pacific Palisades, CA 90272	(Number and Street, City, State, Zip Code)	Telephone Numb 310-230-3335	er (Including Area (	Code)
Address of Principal Business Operations (if different from Executive Officers)	(Number and Street, City, State Zip Code)	Telephone Numb	er (Including Area (	Code)
Brief Description of Business Production of children's' multi-media programming				
Type of Business Organization		_		
corporation business trust	limited partnership, already formed limited partnership, to be formed		please specify): ability Company	PROCESSED
Actual or Estimated Date of Incorporation or Organization of Incorporation or Organization (Enter two			(	MAR 1 1 2003

#### **GENERAL INSTRUCTIONS**

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTIO	N	Į
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Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

/m~

SEC 1972 (6-02)

		A. BASIC IDENT	IFICATION DATA		
2. Enter the information reques	ted for the following:				
<ul> <li>Each beneficial owner:</li> </ul>	having the power to vo and director of corpora	te issuers and of corporate			fequity securities of the issuer. suers; and
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				
Holscher, Kelly Sole					
Business or Residence Address	(Number and Street,	City, State, Zip Code)			
1436 Calle de Jonela, Pacific Pal	isades, CA 90272	<u> </u>			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if inc	lividual)		· · · · · · · · · · · · · · · · · · ·	· <del></del>	
		,			
Business or Residence Address	(Number and Street,	City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				
Business or Residence Address	(Number and Street,	City, State, Zip Code)		<del></del>	
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				
Business or Residence Address	(Number and Street,	City, State, Zip Code)		<del>.</del>	-
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				
Business or Residence Address	(Number and Street,	City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				
Business or Residence Address	(Number and Street,	City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				<del>, , , , , , , , , , , , , , , , , , , </del>
Business or Residence Address	(Number and Street,	City, State, Zip Code)			
	(Use blank	sheet, or copy and use addi	tional copies of this sheet, a	s necessary.)	

LA1:997936.1 2 of 2

7.7.	B. INFORMATION ABOUT OFFERING.	4, 3,	rama, Till
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	YES	NO
	Answer also in Appendix, Column 2, if filing under ULOE.  What is the minimum investment that will be accepted from any individual?	_	
2.	what is the minimum investment that will be accepted from any individual?	\$ <u>10,000</u>	
3.	Does the offering permit joint ownership of a single unit?	YES	NO
4.	Enter the information requested for each person who I has been or will be paid or given, directly or indirectly, any commission or similar		
	remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than		
	five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.		
	ony.		
Full N	Name (Last name first, if individual)		<del></del>
Busin	ness or Residence Address (Number and Street, City, State, Zip Code)		
Name	e of Associated Broker or Dealer	<del></del> -	
,,,,,,,,			
States	s in Which Person Listed Has Solicited or Intends to Solicit Purchasers		<del></del>
(Chec	ck "All States" or check individual States)	🗀 A	Il States
AL	AK AZ AR CA CO CT DE DC FL GA	HI	ID .
IL MT	IN IA KS KY LA ME MD MA MI MN	MS OR	MO PA
RI		WY	PR
Full N	Name (Last name first, if individual)		
Rusin	ness or Residence Address (Number and Street, City, State, Zip Code)		
D03	ines of residence (realises and sures, sury, sure, any second		
Name	e of Associated Broker or Dealer		
			·
States	s in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Chec	ck "All States" or check individual States)	🗀 A	ll States
AL		HI	ID
IL MT	NE NV NH NJ NM NY NC ND OH OK	MS OR	MO PA
RI	SC SD TN TX UT VT VA WA WV WI	WY	PR
Full N	Name (Last name first, if individual)		
t un t	Can't (East name 11st, it individual)		
Busin	ness or Residence Address (Number and Street, City, State, Zip Code)		
Name	e of Associated Broker or Dealer		
States	s in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
	ck "All States" or check individual States)	_ ^	II States
AL IL		HI MS	MO MO
MT RI		OR WY	PA PR

2000

### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box in an indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	S	\$
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify <u>limited liability company interests</u> )	\$ <u>10,000</u>	\$10,000
	Total	\$10,000	\$10,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0? if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	1	\$10,000
	Non-accredited Investors		\$ <u>0</u>
	Total (for filings under Rule 504 only)		\$
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.	Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	$\boxtimes$	\$2,000
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total	⊠	\$2,000

	b. Enter the difference between the aggregate offering price given in response to Part C — Question and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds the issuer."	0		\$ <u>8,0</u>	00
i.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of th purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of th estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Quest 4.b above.	e D	Payments to Officer,		
			Directors, & Affiliates	P	ayments to Others
	Salaries and fees		S		\$
	Purchase of real estate		\$		\$
	Purchase, rental or leasing and installation of machinery and equipment		S		\$
	Construction or leasing of plant buildings and facilities		\$		\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		\$		\$
	Repayment of indebtedness		\$		\$
	Working capital		\$	⊠	\$8,000
	Other (specify):			_	
			s		\$
	Column Totals		\$	⊠	\$8,000
	Total Payments Listed (column totals added)	_	<u> </u>		00
					NESCA P
¢	D. FEDERAL SIGNATURE				
иг 1-2	essuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rudertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the accredited investor pursuant to paragraph (b)(2) and Rule 502.	le 505	5, the following	g signat	ure constit
นr 1-2	ssuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rudertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the	le 505	5, the following	g signat	ure constit
ur n-a ue ka	essuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rudertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the accredited investor pursuant to paragraph (b)(2) and Rule 502.	le 505	5, the following	g signat	ure constit

LA1:997936.1

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

- ATTENTION -

	E. STATE SIGNATURE		2.12.00
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	YES	NO
	See Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D such times as required by state law.	(17 CFR 2	39.500) at
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon writer request, information furnished by the issuer to describe the undersigned issuer hereby undertakes to furnish to the state administrators, upon writer request, information furnished by the issuer to describe the undertakes to furnish to the state administrators.	offerees.	
4.	The undersigned represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limiting (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burdet these conditions have been satisfied.		•
The i	issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersign.	gned duly a	uthorized
	er (Print or Type)  Signature  O(8/1)3		
	e of Signer (Print or Type)  Title of Signer (Print or Type)		
	y Sole Holscher		

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

ì	accredited in	2 sell to non- nvestors in State B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	4  Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA		X	Limited liability company interests \$10,000	1	\$10,000	0	0		х
СО									
СТ									
DE									
DC									
FL									
GA					-				
HI									
ID									
IL									
IN									
IA									
KS									
KY									
LA									
ME									
MD									
MA									
MI									
MN									
MS									
мо									

## APPENDIX

1	Intend to so accredited inve	ell to non- estors in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and e amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
MT										
NE										
NV										
NH	_	7								
NJ										
NM										
NY	·									
NC			-							
ND							-			
ОН										
ОК										
OR										
PA										
RI									·	
SC	·									
SD										
TN			-							
TX										
UT										
VT										
VA										
WA										
WV				-						
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PR						. "	-			

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